



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/709,947	11/10/2000	Watkins et al	MTP-024

Patent Administrator
Testa Hurwitz & Thibault LLP
High Street Tower
125 High Street
Boston, MA 02110

FORMALITIES LETTER

OC000000005669114

Date Mailed: 01/10/2001

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION**FILED UNDER 37 CFR 1.53(b)*****Filing Date Granted***

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.
- **The balance due by applicant is \$ 65.**

*A copy of this notice **MUST** be returned with the reply.*

Customer Service Center
Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

06/13/2001 KZWDIE 00000082 09709947 65.00 OP
01 FC:205

1/10/01



PATENT
Attorney Docket No. MTP-024

Handwritten: N. Sator #3

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Watkins
SERIAL NO.: 09/709,947 GROUP NO.: 1641
FILING DATE: November 10, 2000 EXAMINER: Not yet assigned
TITLE: Materials and Methods for Detection and Treatment of Breast Cancer

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Box Missing Parts, Assistant Commissioner for Patents, Washington, DC 20231 on this 8th day of June, 2001.

Sarah J. Blackwell

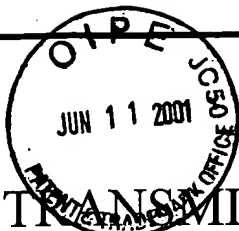
Sarah J. Blackwell

Box Missing Parts
Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Submitted herewith is/are:

Certificate of First Class Mailing (1 pg.); Transmittal Form (1 pg.); Fee Transmittal (1 pg.); Copy of Notice to File Missing Parts of Nonprovisional Application (1 pg.); Declaration and Power of Attorney for Utility or Design Patent Application (3 pgs.); Petition for Extension of Time Under 37 CFR 1.136(a) (1 pg.) (Three Month Extension of Time); Check in the amount of \$510.00 made payable to the Commissioner of Patents and Trademarks; and patent postcard.



TRANSMITTAL FORM

Application Serial Number	09/709,947
Filing Date	November 10, 2000
First Named Inventor	Watkins
Group Art Unit	1641
Examiner Name	Not yet assigned
Attorney Docket No.	MTP-024
BATCH NO. (after allowance)	Not applicable
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form <input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] <input checked="" type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input checked="" type="checkbox"/> Copy of Notice to File Missing Parts of Nonprovisional Application <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input checked="" type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
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CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
Testa, Hurwitz & Thibault, LLP
High Street Tower
125 High Street
Boston, MA 02110
Tel. No.: (617) 248-7000
Fax No.: (617) 248-7100

SIGNATURE BLOCK

Respectfully submitted,

Date: June 8, 2001 D. A. Greenhaugh
Reg. No. 38,678
Tel. No.: (617) 248-7317
Fax No.: (617) 248-7100
Duncan A. Greenhaugh
Attorney for Applicant(s)
Testa, Hurwitz & Thibault, LLP
High Street Tower
125 High Street
Boston, MA 02110

#3

OFFICE OF THE COMMISSIONER OF PATENTS
FEE TRANSMITTAL
FY 2001
JUN 11 2001

Complete if Known	
Application Serial Number	09/709,947
Filing Date	November 10, 2000
First Named Inventor	Watkins
Group Art Unit	1641
Examiner Name	Not yet assigned
Attorney Docket No.	MTP-024

METHOD OF PAYMENT

1. ☒ Payment Enclosed:
☒ Check ☐ Money Order ☐ Other

2. ☒ The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531.
☐ Required Fees (copy of this sheet enclosed).
☒ Additional fee required under 37 CFR 1.16 and 1.17.
☒ Overpayment Credit.

3. ☐ Applicant claims small entity status.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	65.00
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	For filing a request for reexamination	
110	55	Extension for reply within first month	
390	195	Extension for reply within second month	
890	445	Extension for reply within third month	445.00
1,390	695	Extension for reply within fourth month	
1,890	945	Extension for reply within fifth month	
310	155	Notice of Appeal	
310	155	Filing a brief in support of an appeal	
270	135	Request for oral hearing	
130	130	Petitions to the Commissioner	
50	50	Petitions related to provisional applications	
180	180	Submission of Information Disclosure Statement	
710	355	Filing a submission after final rejection (37 CFR 1.129(a))	
710	355	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (Specify)			
Other fee (Specify)			

FEE CALCULATION

1. FILING FEE

Large Entity Fee (\$)	Fee Description	Fee Paid
710	Utility filing fee	
320	Design filing fee	
150	Provisional filing fee	

Total Claims	Number Filed	Number Extra	Rate	Amount
	- 20 =		x \$ 18.00 =	
Independent Claims	- 3 =		x \$ 80.00 =	
<input type="checkbox"/> Multiple Dependent Claim(s), if any				\$270.00 =
TOTAL:				
SMALL ENTITY DISCOUNT:				
SUBTOTAL (1)				(\$)

2. AMENDMENT CLAIM FEES

Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid
Total	-	=	x \$ 18.00 =	
Indep.	-	=	x \$ 80.00 =	
<input type="checkbox"/> First Presentation of Multiple Dep. Claim				+ \$270.00 =
TOTAL:				(\$)
SMALL ENTITY DISCOUNT:				(\$)
SUBTOTAL (2)				(\$)

SUBTOTAL (3) (\$)

510.00

SUBTOTAL (1)	0.00
SUBTOTAL (2)	0.00
SUBTOTAL (3)	510.00
TOTAL (\$)	
510.00	

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Duncan A. Greenhalgh

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